APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: WSL3 STA

1. Applicant					
Name:	GUSA Licensee LLC	Phone Number:	985-335-1503		
DBA Name:		Fax Number:	985-335-1703		
Street:	1351 Holiday Square Blvd.	E-Mail:	Barbee.Ponder@Globalstar.com		
City:	Covington	State:	LA		
Country:	USA	Zipcode:	70433 –		
Attention:	Mr L. Barbee Ponder IV				

2. Contact					
Name:	Wen Doong	Phone Number:	9853351500		
Company:	Globalstar, Inc.	Fax Number:			
Street:	1351 Holiday Square Blvd	E-Mail:			
City:	Covington	State:	LA		
Country:	USA	Zipcode:	70433 –		
Attention:		Relationship:	Engineer		
		he Commission, enter eith	er the file number or the IB Submission ID of the related		
application. Please enter	er only one.) ber SESSTA2021031700522 or S	ubmission ID			
4a. Is a fee submitted with this application?If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).					
Governmental Entity Noncommercial educational licensee					
O Other(please explain):					
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station					
5. Type Request					
Use Prior to Grant O Change Station Location O Other					
	V	ige Station Docation			
6. Requested Use Prior 10/09/2021	Date				
7. CityWasilla		8. Latitude			
		(dd mm ss.s	sh) 61 35 24.9 N		

9. State AK	10. Longitude (dd mm ss.s h) 149 29 9.6 W				
11. Please supply any need attachments.					
Attachment 1: Cover Letter Attachment 2: Technica	al Exhibit Attachment 3:				
12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)					
GUSA Licensee LLC (together with its parent Globalstar, Inc., ('Globalstar')) is seeking a 60 day extension of its existing Special Temporary Authority ('STA') in order to continue to operate a second-generation feeder link earth station antenna and test and validate a new waveform under call sign E050345 in Wasilla, Alaska.					
14. Name of Person Signing L. Barbee Ponder IV	15. Title of Person Signing General Counsel and VP – Regulatory Affairs				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).					

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